Specifications for

Substitute Forms of Louisiana Nonresident Individual Income Tax Return IT-540B (SD and 2D) – 2008 Tax Year

General Information - The 2008 Louisiana Nonresident Individual Income Tax Return is a scannable form processed on high-speed scanners. Substitute computer-generated forms of this return must incorporate a scanband in a fixed format. The scanband is to be formatted to fit onto a single side of one sheet. Accompanying schedules are to be formatted to fit on separate sheets. The exact positioning for each line item in the scanband is listed in these specifications. Punctuation should NOT be printed in the scanband. Signature(s) of the taxpayer(s) on substitute forms must be original.

Paper Requirements - The minimum paper weight used should be 20-pound bond. Recycled paper should not be used. Customers should be instructed on the minimum requirements.

Inks - Black, non-MICR ink must be used to print the return.

Line and Position Numbers - Line numbers are based on 6 lines per vertical inch (pica spacing)—66 lines per 11-inch page. Position numbers are based on 10 characters per horizontal inch (10-pitch spacing)—85 characters per 8½ -inch page.

Fonts - The only acceptable font for the scanband area is 12-point Courier (10 characters per inch). It is requested that this font be set as the default.

Document Identification Numbers - The document identification number must print on Line 62, Positions 74-77. The number must be in 12-point Courier font. The document identification numbers for the forms must be produced by the software company that programs the variable information. The 4-digit document number should print when the return is printed on the customer's printer. This number should not be hard-coded.

Barcodes - A "three of nine" type barcode shall be used on the returns and schedules. The series of lines composing the barcode must be at least ¼ inch in height. The barcode must be placed ½ inch from the bottom edge on Line 63 and ½ inch from the left edge of the page in Position 6. The barcode on each form shall represent the document identification number plus a designated alpha character. The characters that the barcode represents should not be printed with the barcode. The document identification numbers and barcodes on the schedules do not change between the substitute and 2D forms.

	Subs	stitute	2-D		
Form	Doc. ID	<u>Barcode</u>	Doc. ID	Barcode	
Nonresident Return (IT-540B)	6992	6992Q	6999	6999X	
Schedules F-NR and H-NR	6994	6994S	6994	6994S	
Schedules G-NR	6995	6995T	6995	6995T	
Nonresident and Part-Year Resident Worksheet	6998	6998	6998	6998	
Refundable Child Care Credit Worksheet	6978	6978	6978	6978	
Refundable School Readiness Credit Worksheet	6980	6980	6980	6980	
LA Property Insurance Credit Worksheet	6981	6981	6981	6981	

NOTE: There is no alpha character on the barcodes for the worksheets.

Reference Mark around Document Identification Number

- Print a 2-point, ½-inch, vertical line stretching between and inclusive of Lines 61 and 63 (½" from bottom edge) and positioned between Positions 80 and 81 (½" from right edge).
- Print a 2-point ½-inch, horizontal line stretching between and inclusive of Positions 76 and 80 (½" from right edge) and positioned between Lines 60 and 61 (1" from bottom edge).

Reference Marks around Scanband Area

- Print a 2-point, ½-inch, vertical line stretching between and inclusive of Lines 24 and 26 and positioned between Positions 5 and 6 (½" from left edge).
- Print a 2-point, ½-inch, horizontal line stretching between and inclusive of Positions 6 and 10 (½" from left edge) and positioned between Lines 23 and 24.
- Print a 2-point, ½-inch, vertical line stretching between and inclusive of Lines 24 and 26 and positioned between Positions 80 and 81 (1/2" from right edge).
- Print a 2-point, ½-inch, horizontal line stretching between and inclusive of Positions 76 and 80 (½" from right edge) and positioned between Lines 23 and 24.

Address for Mailing Return and Payment - The address will be a variable field located on Lines 7-9, Positions 17-33. See the substitute forms IT-540B SD and IT-540B 2D, which have grids to show placement.

Returns being submitted with a payment or indicating a balance due should be mailed to:

PO BOX 3550 BATON ROUGE LA 70821-3550

Return indicating a refund or no tax due should be mailed to:

PO BOX 3440 BATON ROUGE LA 70821-3440

Specific Positions outside the Scanband - The mark-sense indicators (alpha "O") for "Name Change", "Address Change", "Amended Return", and "Decedent" are areas outside of the scanband that will be read by the scanner. These areas outside of the scanband must be programmed in the specific manner and at the positions given below:

- The specific position for the change of name "O" is Line 11, Position 7.
- The specific position for the change of address "O" is Line 12, Position 7.
- The specific position for the amended return "O" is Line 13, Position 7.
- The specific position for the decedent return "O" is Line 14, Position 7.

Rectangular drawn mark-sense boxes are NOT to be used to mark these positions. The "Name Change", "Address Change", "Amended Return" and "Decedent" positions must be marked by use of an upper case alpha "O" (not the numeral zero) in 12-point Courier font. The "O" must be hard-coded into the form template and must be programmed so that it can be marked with "X" (uppercase) in order to denote changes.

Name and Address Area - The following data should be left-justified:

- The taxpayer's social security number must be printed on Line 15, Positions 6-14.
- The spouse's social security number must be printed on Line 15, Positions 17-25. If no spouse, zero-fill all 9 positions.
- The taxpayer's telephone number must be printed on Line 15, Positions 28-37.
- The taxpayer name must be printed on Line 16, Positions 6-40. Include the middle initial and suffix if applicable.
- The spouse's name must be printed on Line 17, Positions 6-40, if applicable. Include the middle initial and suffix if applicable. If no spouse, leave blank.
- The taxpayer's address must be printed on Lines 18-20, Positions 6-40. An address is required with "General Delivery" as the default.

Dependent Name Area - The first name, last name, social security number, relationship, and birthdate (mm/dd/yyyy) of each dependent should be printed on the lines provided at the top of the 1st page of the nonresident schedules (Doc. ID 6994). If the filing status is head of household, the name of the qualifying person must be printed on the line provided (under Line 5 on the return).

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Schedule Page - If the taxpayer does not utilize any portion of the schedule pages, then the schedule page should not be submitted with the return. If any portion of any of the schedule page is utilized then that schedule page should be submitted with the return.

Software Developer Identification Number - Each software developer who hard-codes the basic form template and/or soft-codes the program of the scanband area of the resident and/or nonresident form, must have a four-digit software developer's identification number, approved by the Louisiana Department of Revenue. This number remains the same each year. This number MUST appear at the top left of the form and schedules and in the designated area of the scanband of the form.

- For those who hard-code the basic form template, the software developer identification number should be printed on Line 9, Positions 6-9. On the schedule form the software identification number should be hard-coded on Line 6, Positions 6-9.
- For those who soft-code the program of the scanband of the form, the number should be soft-coded, right-justified, zero-fill, in Column 2, Line 31, Positions 15-24.

General Information 3

Scanband area for the Nonresident Form (IT-540B SD and IT-540B 2D)

General Information - The read area in the scanband will be composed of one horizontal line and eight vertical columns. Four columns will have static printed text (Columns 1, 3, and part of 5 and 7), and six columns will be used for variable printed information (Columns 2, 4, 6, 8, and part of 5 and 7).

- Only 12-point Courier font (10 characters per inch) should be used.
- Both alpha and numeric entries will be accepted in the scanband. All alpha characters should be in upper
 case. All monetary entries must be positive, rounded to the nearest dollar, and with NO symbols, decimal
 points, commas, or any other punctuation. If value is negative, zero-fill field.
- No punctuation is allowed in any field.
- Right justify all data in each column, including dollar amounts, numeric entries, etc.
- Zero-fill all blank data areas, except areas used for the name and address codes (four positions each) in horizontal line area.
- The name and address codes should begin at the left most position allotted for these items and any
 position not used should be left BLANK. Punctuation and hyphens should be omitted and no position
 allotted for them.

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EXAMPLES: John Doe, 1234 Main Street = DOE_1234

John Deer, 123 Main Street = DEER123_
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- Print "0" to designate a negative response, and print "1" to designate a positive response, unless otherwise specified.
- The horizontal line area will occupy Line 26, positions 7-26, 30-37, 41-50, 53, 55, 57-61, 64, 68, 70, 72, 75, and 78.
- First vertical column will occupy Lines 29-50, positions 7-11.
- Second vertical column will occupy Lines 29-50, positions 15-24.
- Third vertical column will occupy Lines 29-50, positions 28-32.
- Fourth vertical column will occupy Lines 29-50, positions 36-43.
- Fifth vertical column will occupy Lines 29-52, positions 47-51.
- Sixth vertical column will occupy Lines 29-52, positions 55-62.
- Seventh vertical column will occupy Lines 29-47, positions 66-70.
- Eighth vertical column will occupy Lines 29-47, positions 74-80.

Specific Placement of Line Items in the Scanband - Nonresident Forms (IT-540B SD and IT-540B2D) The following data must appear in the exact positions listed in the scanband on the nonresident form:

Horizontal Line Area

- 7. Beginning month of fiscal year filer (Mark "00" if not applicable.)Line 26, positions 7-8
- 8. Ending month of fiscal year filer (Mark "00" if not applicable.)Line 26, positions 9-10

9.	Mark "1" if name has changed, mark "2" if address has changed, or mark "3" if both have changed. (Mark "0" if not applicable.)	Line 26, p	osition 11
10.	Mark "1" for an amended return (Mark "0" if not applicable.)	Line 26, p	osition 12
11.	Mark the appropriate number for the filing status	Line 26, p	osition 13
	Single = 1 Married filing jointly = 2 Married filing separately = 3 Head of household = 4 Qualifying widow(er) = 5		
12.	Mark "1" for "Yourself - 65 or over". (Mark "0" if not applicable.)	Line 26, p	osition 14
13.	Mark "1" for "Spouse - 65 or over". (Mark "0" if not applicable	Line 26, p	osition 15
14.	Mark "1" for "Yourself - Blind". (Mark "0" if not applicable.)	Line 26, p	osition 16
15.	Mark "1" for "Spouse - Blind". (Mark "0" if not applicable.)	Line 26, p	osition 17
16.	Line 6C, Total Dependents	Line 26, p	ositions 18-19
17.	Line 6D, Total Exemptions Claimed	Line 26, p	ositions 20-21
18.	Check digit for first Social Security Number (Derived by Modulus 10 routine attached.)	Line 26, p	osition 22
19.	Check digit for second Social Security Number (Derived by Modulus 10 routine attached.)	Line 26, p	osition 23
20.	Check digit (Derived by Modulus 10 routine attached.) for all of the following: first Social Security Number, check digit, second Social Security Number, check digit, taxpayer name code, taxpayer address code (28 byte field)	Line 26, p	osition 24
21.	Check digit for Tax Balance Due Louisiana (from Line 50 of return, derived by Modulus 10 Routine attached.)	Line 26, p	osition 25
22.	Check digit for Refund (from Line 43 of return, derived by Modulus 10 routine attached.)	Line 26, p	osition 26
23.	Name code	Line 26, p	ositions 30-33
	Must be alpha, uppercase only, and derived from first four letters of last name. If last name is less than four letters, leave the last position(s) blank. Punctuation and hyphens should be omitted.		
	Name code examples: John Brown = BROW; John Bow = BOW		
	To convert the name code from alpha to numeric for check digit calculation, use the following conversion:		
	Letters A-I = 1-9 Letters J-R = 1-9 Letters S-Z = 2-9 Blank Spaces = 0		
24.	Address Code	Line 26, p	ositions 34-37
	(If alpha included, must be upper case and derived from first four positions, including blank spaces, of address. If address code is less than four letters, leave the last position(s) blank. Punctuation and hyphens should be omitted.		

Address code examples: 1234 Main St. = 1234; 12 Main St. = 12_M ; P.O. Box = PO_B .

To convert the address code from alpha to numeric for check digit calculation, use the following conversion:

Letters A-I = 1-9 Letters J-R = 1-9 Letters S-Z = 2-9 Blank Spaces = 0

25.	For daytime area code and telephone number of taxpayer	Line 26, positions 41-50
26.	Mark "1" for decedent taxpayer, "2" for decedent spouse, and "3" if both are deceased. (Mark "0" if not applicable.)	Line 26, position 53
27.	Mark "1" if federal return not required. (Mark "0" if not applicable.) If "1" is marked, Line 7 must be "0."	Line 26, position 55
28.	If "1" is marked in position 55, enter the wages from the W-2s. (Mark "0" if not applicable.)	Line 26, positions 57 - 61
29.	Consumer Use Tax – Mark "1" if no use tax. Mark "2" if amount is from worksheet. (Must be a "1" or "2")	Line 26, position 64
30.	Mark "1" if extension is attached. (Mark "0" if not applicable.)	Line 26, position 68
31.	Status of Return - Mark "1" for Credit to 2009 only (Line 42). Mark "2" for Refund Only (Line 43). Mark "3" for a Credit to 2009 and a Refund (Lines 42 and 43). Mark "4" for Balance Due (Line 50). Mark "5" if all lines are zero (Lines 42, 43, and 50). Example: If Line 43 is \$200 and Line 21 is zero, mark "2". If Line 42 is \$100 and Line 43 is \$200, mark "3".	Line 26. position 70
32.	Contribution and Donation Status - Mark "0" if Lines 40 and 45 are both zero. Mark "1" if Line 40 is greater than zero. Mark "2" if Line 45 is greater than zero. Mark "3" if Lines 40 and 45 are greater than zero	•
33.	Farmer Indicator Box for Underpayment Penalty - Mark "1" if farmer indicator box is marked on Line 32. Mark "2" if farmer indicator box is marked in Line 49. Mark "0" if not applicable.	Line 26, position 75
34.	Mark "1" if federal income tax has been decreased by a federal disaster credit allowed by IRS (Line 10E). (Mark "0" if not applicable.)	Line 26, position 78

NOTE: Positions for "Yourself" exemption and for "Spouse" exemption have been purposely omitted from the scanband record layout.

* Column One - Nonresident Form

Enter TPSSN	.Line 29, positions 7-	11
	Line 30, positions 7-	11
Enter DEVID	.Line 31, positions 7-	11
Enter TAXPD	Line 32, positions 7-	11
Enter FORMN	Line 33, positions 7-	11
Enter PTIN	Line 34, positions 7-	11
Enter LINE7	.Line 35, positions 7-	11
Enter LN8	.Line 36, positions 7-	11
Enter LN9	Line 37, positions 7-	11
Enter LN10A	.Line 38, positions 7-	11
Enter LN10B	Line 39, positions 7-	11
Enter LN10C	Line 40, positions 7-	11
Enter LN10D	.Line 41, positions 7-	11
Enter LN10E	Line 42, positions 7-	11
Enter LN10F	Line 43, positions 7-	11
Enter LN10G	Line 44, positions 7-	11
Enter LN11	Line 45, positions 7-	11
Enter LN12	Line 46, positions 7-	11
Enter LN13A	Line 47, positions 7-	11
Enter LN13B	Line 48, positions 7-	11
Enter LN13C	Line 49, positions 7-	11
Enter LN13D	.Line 50, positions 7-	11

* Column Two - Nonresident Form

35.	Taxpayer's SSN	.(Ex: 0111222333)	Line 29, positions 15-24
36.	Spouse's SSN	.(Ex: 0222333444)	Line 30, positions 15-24
		.(Ex: 0000001111)	Line 31, positions 15-24
38.	Taxable Period	.(Ex: 0012312008)	Line 32, positions 15-24
39.	Form ID Number	.(SD Ex: 0000006992, 2D Ex: 0000006999)	Line 33, positions 15-24
40.	FEIN/PTIN/SSN	.(Ex: 099999999)	Line 34, positions 15-24
41.	Return Line 7		Line 35, positions 15-24
42.	Return Line 8	.LA Adjusted Gross Income	Line 36, positions 15-24
43.	Return Line 9	.Ratio of LA AGI to Federal AGI	Line 37, positions 15-24
44.	Return Line 10A	.Federal Itemized Deductions	Line 38, positions 15-24
45.	Return Line 10B	.Federal Standard Deduction	Line 39, positions 15-24
46.	Return Line 10C	.Excess Federal Itemized Deduction	Line 40, positions 15-24
47.	Return Line 10D	.65% Excess Federal Itemized Deduction	Line 41, positions 15-24
48.	Return Line 10E	.Federal Income Tax	Line 42, positions 15-24
49.	Return Line 10F	.Total Deductions – Add Lines 10D and 10E	Line 43, positions 15-24
50.	Return Line 10G	.Allowable Deductions	Line 44, positions 15-24
51.	Return Line 11	.LA Net Income	Line 45, positions 15-24
52.	Return Line 12	.LA Income Tax	Line 46, positions 15-24
53.	Return Line 13A	.Federal Child Care Credit	Line 47, positions 15-24

* Column Two – Nonresident Form (continued)

54.	Return Line	13B	.Nonrefundable Child Care Credit .	Line 48,	positions	15-24
55.	Return Line	13C	Nonref. Child Care Credit Carried.	ForwardLine 49,	positions	15-24
56.	Return Line	13D	.Nonrefundable School Readiness	CreditLine 50,	positions	15-24

* Column Three - Nonresident Form

Enter LN14	Line 29, positions 28-32
Enter LN15	Line 30, positions 28-32
Enter LN16	Line 31, positions 28-32
Enter LN17	
Enter LN18	Line 33, positions 28-32
Enter LN19	Line 34, positions 28-32
Enter LN20	
Enter LN20A	Line 36, positions 28-32
Enter LN20B	Line 37, positions 28-32
Enter LN21	Line 38, positions 28-32
Enter LN22	Line 39, positions 28-32
Enter LN23	Line 40, positions 28-32
Enter LN24	Line 41, positions 28-32
Enter LN25	Line 42, positions 28-32
Enter LN26	Line 43, positions 28-32
Enter LN27	Line 44, positions 28-32
Enter LN28	Line 45, positions 28-32
Enter LN29	Line 46, positions 28-32
Enter LN30	Line 47, positions 28-32
Enter LN31	Line 48, positions 28-32
Enter LN32	Line 49, positions 28-32
Enter LN33	Line 50, positions 28-32

* Column Four – Nonresident Form

57. Return Line 1	4 Education Credit	Line 29, po:	sitions 36-43
58. Return Line 1	5Other Nonrefundable Ta	ax CreditsLine 30, pos	sitions 36-43
59. Return Line 1	6Total Nonrefundable Ta	x CreditsLine 31, pos	sitions 36-43
60. Return Line 1	7Adjusted LA Income Tax	xLine 32, po:	sitions 36-43
61. Return Line 1	8Consumer Use Tax	Line 33, po:	sitions 36-43
62. Return Line 1	9Total - Add Lines 17 an	d 18Line 34, po:	sitions 36-43
63. Return Line 2	20Refundable Child Care	CreditLine 35, po:	sitions 36-43
64. Return Line 2	OARefundable Child Care	Credit worksheet, Line 3Line 36, po:	sitions 36-43
65. Return Line 2	OBRefundable Child Care	Credit worksheet, Line 6Line 37, pos	sitions 36-43
66. Return Line 2	1Refundable School Rea	diness CreditLine 38, pos	sitions 36-43
67. Return Line 2	2LA Citizens Insurance C	creditLine 39, pos	sitions 36-43
68. Return Line 2	3LA Property Insurance (CreditLine 40, pos	sitions 36-43
69. Return Line 2	4Other Refundable Tax C	CreditsLine 41, pos	sitions 36-43

* Column Four – Nonresident Form (continued)

71. 72. 73. 74. 75. 76. 77.	Return Line 2 Return Line 2 Return Line 2 Return Line 3 Return Line 3 Return Line 3	26 27 28 29 30 31	LA Tax WithhCredit CarriePaid by ComAmount of EsAmount PaidTotal RefundOverpaymenUnderpaymenAdjusted Ove	d Forward posite Pa stimated F with Exte able Cred t	d from 200 rtnership Payments ension Readits and Pa fits and Pa	O7	3 X	Line 43, Line 44, Line 45, Line 46, Line 47, Line 48,	positions positions positions positions positions positions positions	36-43 36-43 36-43 36-43 36-43 36-43
* Col	umn Five – N	lonreside	nt Form							
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Ente	r LN46							Line 41,	positions	47-51
Ente	r LN47							Line 42,	positions	47-51
Ente	r LN48							Line 43,	positions	47-51
									•	
								,	•	
Ente	r FNR1D							Line 46,	positions	47-51
Field of 2-I Bar C)									
79.			refundable credit not applicable					Line 47,	positions	47-51
80.		•	refundable credit not applicable		•			Line 48,	positions	47-51
81.			refundable credit not applicable					Line 49,	positions	47-51
82.	Enter F5, en	ter 3-digit	refundable credit not applicable	code in	positions	49-51.	Leave		positions	
83.	Enter F6, en	ter 3-digit	refundable credit not applicable	code in	positions	49-51.	Leave		•	
Ente	r FNR7							Line 52,	positions	47-51

* Column Six – Nonresident Form

84.	Return Line 34	.Military Family Assistant Fund	Line 2	29, positions 55	5-62
		.START Program			
		.Wildlife Habitat and Natural Heritage Tru			
		.LA Prostate Cancer Trust Fund			
		.LA Animal Welfare Commission			
		.Community Based Primary Health Care .			
		.Total Donations – Add Lines 34 – 39			
		.Subtotal – Subtract Line 40 from Line 33			
		Amount Credited to 2009			
		Amount to be Refunded			
		Amount Owed			
		Additional Donation to Military Family Fu			
		Interest			
		Delinquent Filing Penalty			
		Delinquent Payment Penalty			
90.	Poturn Line 40	.Underpayment Penalty for Tax Due	Line	to, positions of	5 62
99. 100	Poturn Line 49	Balance Due LA	Line	14, positions 55	5 62
		Fees for LA Hunting and Fishing License			
		Additional Refundable Credit, Line 2			
		Additional Refundable Credit, Line 3		• •	
		Additional Refundable Credit, Line 4			
		Additional Refundable Credit, Line 5		′ •	
		.Additional Refundable Credit, Line 6		o1, positions 55	0-62
107.	Return SCH.FNR Line /	.Total Refundable Credits – Add Lines 1D		-0 '	- 00
		2 – 6	Line :	52, positions 55	0-62
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CO	umn Seven – Nonresident	FOIII			
Ente	r HNR1		Line 2	29. positions 66	6-70
				• •	
				• •	
	1 ON(3D		Line	or, positions oc)- <i>1</i>
Field	#				
of 2-					
Bar (Code				
108.	Enter G4, enter 3-digit nonn	efundable credit code in positions 68-70.	Leave		
		applicable		38, positions 66	6-70
109.		efundable credit code in positions 68-70.		, , , , , , , , , , , ,	•
- • •		applicable		39. positions 66	6-70
		11		, ,	-

* Column Seven – Nonresident Form (continued)

 110. Enter G6, enter 3-digit nonrefundable credit code in positions 68-70. Leave positions 68-70 blank if not applicable. 111. Enter G7, enter 3-digit nonrefundable credit code in positions 68-70. Leave 	Line 40, positions 66-70
positions 68-70 blank if not applicable	Line 41, positions 66-70
 112. Enter G8, enter 3-digit nonrefundable credit code in positions 68-70. Leave positions 68-70 blank if not applicable. 113. Enter G9, enter 3-digit nonrefundable credit code in positions 68-70. Leave 	•
positions 68-70 blank if not applicable	Line 43, positions 66-70
Enter GNR10 Enter 13DSF Enter 21SF Enter SCODE	Line 45, positions 66-70Line 46, positions 66-70

* Column Eight – Nonresident Form

		Federal Income Tax Liability	
115.	Return SCH.HNR Line 2	Federal Disaster Credits	Line 30, positions 74-80
116.	Return SCH.HNR Line 3	Total - Add Lines 1 and 2	Line 31, positions 74-80
117.	Return SCH.GNR Line 1D.	Total Number of Qualifying Individuals	Line 32, positions 74-80
118.	Return SCH.GNR Line 1E	Multiply Line 1D by \$100	Line 33, positions 74-80
119.	Return SCH.GNR Line 2A	Value of Computer/Technological Equipment	Line 34, positions 74-80
120.	Return SCH.GNR Line 2B.	Multiply Line 2A by 40%	Line 35, positions 74-80
		Certain Federal Tax Credits	
		Multiply Line 3A by 10%. (Limited to \$25)	
		Additional Nonrefundable Credit, Line 4	• •
		Additional Nonrefundable Credit, Line 5	• •
		Additional Nonrefundable Credit, Line 6	• •
		Additional Nonrefundable Credit, Line 7	• •
		Additional Nonrefundable Credit, Line 8	* I
		Additional Nonrefundable Credit, Line 9	• •
		Total Nonrefundable Credits - Add Lines 1E,	,,
		2B, 3B, and 4-9	Line 44. positions 74-80
130.	Return Line 13D	Positions 74-76 are zeros. Position 77 is the	,,
		number of dependents who attended a 5-star	
		facility. Position 78 is the number of	
		dependents who attended a 4-star facility.	
		Position 79 is the number of dependents who	
		attended a 3-star facility. Position 80 is the	
		number of dependents who attended a 2-star	
		facility	Line 45 positions 74 90
		racility	Line 45, positions 74-60

* Column Eight – Nonresident Form (continued)

131. Return Line 21	Positions 74-76 are zero-filled. Position 77 is the number of dependents who attended a 5-star facility. Position 78 is the number of dependents who attended a 4-star facility. Position 79 is the number of dependents who attended a 3-star facility. Position 80 is the number of dependents who attended a 2-star	
	facility	Line 46, positions 74-80
132. SPEC CODE	Positions 74-76 are zero-filled. Positions 77-80 are for a special event code, which will be	
	issued as needed. Zero-fill if not applicable.	Line 47, positions 74-80

2-D Barcode for Substitute Forms

General Requirements - The Louisiana Department of Revenue is utilizing two-dimensional barcode technology for the resident (IT-540 2D) and nonresident (IT-540B 2D) individual income tax forms. The following are general requirements:

- The 2-D barcode should be placed in the upper right-hand corner of the form positioned ½" from the top edge and ½" from the right edge of the page.
- The area reserved for the barcode measures 4-5/8" x 1-11/16", which includes a ¼" blank area around the barcode. The barcode must fit within this area on the form.
- Use a carriage return <CR> to delimit fields. Each barcode field should have a carriage return, even if no information is contained in the field. This carriage return should measure 1 byte of data.
- No punctuation is allowed in any field. No hyphens, dashes, parentheses, or other separators should be used.
- All alpha characters should be in uppercase.
- Do not zero-fill numeric fields.
- Negative amounts are not accepted. If less than zero, leave blank.
- Only whole dollar amounts should be entered.
- Do not include supplemental information in the barcode.
- Error correction level should be set to 4.

Printers - To print a readable barcode, a printer capable of 200 dots per inch (DPI) **minimum** is required; however, **300 DPI or higher is recommended.** If the printer can produce a graphic such as a tax agency seal or logo, then the printer should be capable of producing a 2-D barcode.

Barcode Layout:

- 1. Header Information
- 2. Government Specific Data
- 3. Trailer

Header Information - This information should be placed first in the barcode data stream. The first six fields in the barcode comprise the official header. This information must be consistent among all barcodes and is defined below.

- Header Version Number will be incremented each time the standards group alters the physical structure of the barcodes that were created using multiple header formats. This value is static for all barcodes and is currently T1.
- **Developer Code** is a four-digit code used to identify the software developer whose application produced the barcode. The purpose of the field is to allow forms to be traced to the vendor producing them. Software developer codes are assigned through the NACTP.
- **Jurisdiction** is an alphanumeric identifier indicating the taxing jurisdiction. Use the U.S. Postal Service's official state abbreviations. For Louisiana, use LA.
- **Description** is an alphanumeric identifier used to describe the form being processed. The identifier can be used to route the barcode information to the correct system for further processing. For Louisiana, use 6988 for the resident form and 6999 for the nonresident form.

- **Specification Version** is a number that identifies the version of the specifications used to produce the form barcode. These specifications are provide by the jurisdiction processing the form and describe the data layout in the barcode. Draft versions of the specifications are not assigned version numbers. The final version shall be "0"; revisions thereafter will increase numerically.
- **Software/Form Version** is a vendor-defined version number that reflects which revision of the form is used to produce the barcode.

Government Specific Data – For a detailed layout of the government specific data for the 2-D barcode on the resident return (IT-540 2D), see the document <u>Specifications for 2-D Barcode on 2008 IT-540 2D</u> (R-6234). For a detailed layout of the government specific data for the 2-D barcode on the nonresident return (IT-540B 2D), see the document <u>Specifications for 2-D Barcode on 2008 IT-540B 2D</u> (R-6235).

Trailer - The trailer is the last field in the barcode data stream. The trailer is used to indicate the end of data has been reached. A static string of *EOD* is used as the trailer value. If a trailer is not found upon scanning the barcode, this indicates that some data may not be included in the barcode due to data size restrictions.

Example of 2-D Barcode: T1<CR> (Header Version Number)

9999<CR> (Developer Code) LA<CR> (Jurisdiction) 6999<CR> (Description)

0<CR> (Specification Version) 1.0<CR> (Software Version)

...

EOD<CR>

Information to Provide to Customers - We are requesting that all participating vendors provide to their customers a few short statements that describe what a two-dimensional barcode is and why it is being utilized. The following information should be provided to the customer only if your software reproduces the two-dimensional barcode:

Louisiana Resident (IT-540) and Nonresident (IT-540B) Individual Income Tax Forms

The Louisiana Department of Revenue is utilizing the 2-D barcode technology. The barcode contains the information that was entered into your return

Below, is an example of the two-dimensional barcode. You will find this barcode in the top right-hand corner of your completed return. Please note the two-dimensional barcode will **not** be found on the form in the printed booklet version you **may** have received in the mail.

2-D Barcode Sample



Modulus 10 Self-check Digit Computation:

- 1. Multiply the unit's position and every alternate position of the base number by 2 starting with right most position.
- 2. Add the digits in the products to the digits in the base number that were not multiplied.
- 3. Subtract the sum from the next higher number ending in zero. The difference is the self-check digit.

Example:

Base Number 4 9 9 8 6 5 5 5 9

Right most position and every other position 9 5 6 9 4

Multiply by 2. 18, 10, 12, 18, 8

Add the digits in the product. (1+8), (1+0), (1+2), (1+8), 8

Digits not multiplied. 5 5 8 9

Add. (1+8)+5+(1+0)+5+(1+2)+8+(1+8)+9+8

Sum 57

Next higher number ending in zero 60

Subtract. 60-57

Self-check digit 3

<u>Test Scenarios for Nonresident Forms (IT-540B SD and 2D)</u>

Scenario 1 has all the calculations and answers provided. However, Scenarios 2 through 5 require you to make some calculations. Please provide 1 sample of R-6007 when submitting the test samples.

Scenario 1

Alton Seed and Jackie Seed are married filing jointly with a total of 5 exemptions—2 personal and 3 dependent exemptions. Alton's SSN is 555-67-8905, and Jackie's SSN is 123-56-4356. Their address is P.O. Box 1490, Wilson, TX 79381-0230. They have 3 children: Linda (daughter), SSN 400-55-3015, DOB 07/06/1993; Josh (son), SSN 400-00-1015, DOB 08/12/2003; and Andrew (son), SSN 400-00-5015, DOB 05/14/2005. No use tax is due.

Return:						
Line 7 =	221,160	Line 12 =	3,504	Line 28	=	2,400
Line 8 =	113,160	Line 13A =	700	Line 30	=	3,405
Line 9 =	51.16%	Line 13B =	25	Line 31	=	301
Line 10A =	51,877	Line 13D =	75	Line 33	=	301
Line 10B =	10,900	Line 14 =	50	Line 34	=	51
Line 10C =	40,977	Line 15 =	250	Line 40	=	51
Line 10D =	26,635	Line 16 =	400	Line 41	=	250
Line 10E =	27,543	Line 17 =	3,104	Line 42	=	200
Line 10F =	54,178	Line 19 =	3,104	Line 43	=	50
Line 10G =	27,717	Line 24 =	505			
Line 11 =	85,443	Line 26 =	500			

NPR Worksheet:

	Federal	State
=	98,000	0
=	130,959	130,959
=	228,959	130,959
=	7,799	7,799
=	221,160	123,160
=		123,160
=		10,000
=		10,000
=		113,160
	= = = = =	= 98,000 = 130,959 = 228,959 = 7,799 = 221,160 = =

Schedule F-NR:

Line 2: Wind and Solar Energy Systems (64F)	275
Line 3: School Readiness Business-Supported Child Care (67F) =	100
Line 4: School Readiness Fees and Grants=130 (68F)	130
Line 7	505

Schedule G-NR:

Line 4: Apprenticeship (236)	150
Line 5: Brownfields Investor (260)	100
Line 10	250

Thomas J. Hoover is single with 1 exemption. His SSN is 434-66-2984. His address is 200 W. 22nd St., Waveland, MS 39576-1234. Use tax is due.

Return:

Line 7 =	91,591	Line 11 =	10,135	Line 27	= 116
Line 8 =	12,462	Line 12 =	190	Line 30	= (calculate)
Line 9 =	(calculate)	Line 16 =	0	Line 44	= (calculate)
Line 10E =	17,113	Line 18 =	126	Line 45	= 22
Line 10F =	17,113	Line 19 =	(calculate)	Line 50	= (calculate)
Line 10G =	(calculate)	Line 24 =	97		

NPR Worksheet:							
	Federal	State					
=	85,145	0					
=	12,462	12,462					
=	(calculate)	(calculate)					
=	6,016	0					
=	(calculate)	(calculate)					
=		(calculate)					
=		(calculate)					
	= = = =	Federal = 85,145 = 12,462 = (calculate) = 6,016 = (calculate)					

Schedule F-NR:

Line 2: School Readiness Child Care Provider (65F)	97
Line 7	(calculate)

Jason Greenley, Sr., is filing head of household with a total of 2 exemptions—1 personal and 1 dependent exemption. His SSN is 444-34-5287. His address is 822 Mark St., Baton Rouge, LA 70806-6360. He has one son, John, whose SSN is 555-45-6298 and DOB 03/15/2004. John attended Little Tykes Learning Center (EIN 727654321), a child care facility that is participating in the Quality Star Rating program and is rated as a 5 star facility. The center is located at 4321 First Ave., Baton Rouge, LA 70802. Use tax is due.

Return:						
Line 7 =	24,742	Line 18	=	84	Line 30	= (calculate)
Line 8 =	18,244	Line 19	=	(calculate)	Line 31	= (calculate)
Line 9 =	73.73%	Line 20	=	195	Line 33	= (calculate)
Line 10E =	0	Line 20A	=	1,300	Line 40	= 0
Line 11 =	18,244	Line 20B	=	1,300	Line 41	= (calculate)
Line 12 =	(calculate)	Line 21	=	390	Line 42	= 300
Line 16 =	0	Line 24	=	124	Line 43	= (calculate)
Line 17 =	333	Line 25	=	217		
NPR Worksl	neet:					

		Federal	State
Line 1	=	24,742	18,244
Line 10	=	24,742	18,244
Line 12	=	24,742	18,244
Line 15	=		18,244
Line 32	=		18,244

Schedule F-NR:

Line 2: School Readiness Child Care Directors and Staff (66F)=	124
Line 7	124

Louisiana Refundable Child Care Credit Worksheet:

Line 1 (Column D)=	1,300
Line 2 (Column G)	1,300
Line 3	1,300
Line 4=	24,742
Line 5=	24,742
Line 6=	(calculate)
Line 7=	(calculate)
Line 8=	(calculate)
Line 9	(calculate)
Line 11	(calculate)

Louisiana Refundable School Readiness Credit Worksheet:

Line 1=	195
Line 2 (i)	
Line 3	(calculate)
line 4	(calculate)

Bennie Smith is a qualifying widower with a total of 2 exemptions—1 personal and 1 dependent exemption. His SSN is 254-15-2423. His address is 1838 Villa Mansion Dr., Dallas, TX 75238-0101, and telephone number is (214) 555-1234. He has one son, Barry, whose SSN is 254-16-3534, DOB 12/08/2006. The tax preparer's identification number is P12345678, and telephone number is (214) 555-1111. No use tax is due.

Return:				
Line $7 = 108,000$	Line 11 = (calculate)	Line 22	=	73
Line 8 = 93,500	Line 12 = (calculate)	Line 23	=	62
Line 9 = (calculate)	Line 13A = 529	Line 25	=	600
Line 10A = 14,600	Line 13B = 25	Line 26	=	100
Line 10B = 10,900	Line 13D = 13	Line 28	=	300
Line 10C = (calculate)	Line 15 = 375	Line 30	=	(calculate)
Line 10D = (calculate)	Line 16 = 413	Line 44	=	1,601
Line 10E = 12,765	Line 17 = (calculate)	Line 50	=	1,601
Line 10F = (calculate)	Line 18 = 0			
Line 10G = (calculate)	Line 19 = (calculate)			

NPR Worksheet:

		Federal	State
Line 1	=	102,500	93,500
Line 2	=	3,000	0
Line 9	=	2,500	0
Line 10	=	(calculate)	(calculate)
Line 11	=	0	0
Line 12	=	(calculate)	(calculate)
Line 15	=		(calculate)
Line 31	=		0
Line 32	=		(calculate)

Schedule G-NR:

Line 4: Motion Picture Investment (251)	168
Line 5: Motion Picture Infrastructure (261)	
Line 10	(calculate)

Louisiana Property Insurance Credit Worksheet:

960	÷ I=	Line
73	2=	Line
	93=	
(calculate)	2.5	Line

Donald Porter is married filing separately with a total of 2 exemptions. His SSN is 567-10-2345, and his spouse's SSN is 343-21-3434. His current address is 3319 Clement St., Port Arthur, TX 77642-9998; however, he lived in Louisiana during part of the 2008. He has one dependent, Daffy (son), whose SSN is 678-90-7234 and DOB 11/30/2006. Daffy attended Little Angels Daycare (EIN 721122333), a child care facility that is participating in the Quality Star Rating program and is rated as a 4 star facility. The center is located at 1000 Lakeshore Dr., Lake Charles, LA 70601. No use tax is due.

Return:								
Line 7	=	23,000	Line 20	=	155	Line 32	=	0
Line 8	=	19,000	Line 20A	=	1,000	Line 33	=	(calculate)
Line 9	=	82.60%	Line 20B	=	1,000	Line 40	=	0
Line 11	=	19,000	Line 21	=	233	Line 41	=	(calculate)
Line 12	=	419	Line 25	=	183	Line 42	=	0
Line 16	=	0	Line 30	=	571	Line 43	=	(calculate)
Line 19	=	(calculate)	Line 31	=	(calculate)			

NPR Worksheet:

	Federal	State	
Line 1	=	23,000	19,000
Line 10	=	23,000	19,000
Line 11	=	0	0
Line 12	=	(calculate)	(calculate)
Line 15	=		(calculate)
Line 31	=		0
Line 32	=		(calculate)

Louisiana Refundable Child Care Credit Worksheet:

Louisiana Kerandabie Onna Oare Orean Worksheet.	
Line 1 (Column D)	1,000
Line 2 (Column G)	1,000
Line 3	1,000
Line 4	23,000
Line 5	23,000
Line 6	(calculate)
Line 7	(calculate)
Line 8	(calculate)
Line 9	'
Line 11	(calculate)

Louisiana Refundable School Readiness Credit Worksheet:

Line 1	155
Line 2 (ii)	1.5
Line 3	
Line 4	